

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	DATE	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	12/1	31	11/27
FORMALITY REVIEW		100611	1-21-0
RESPONSE FORMALITY REVIEW	4/1	4/1	12/1/0

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ (Through numbers) Canceled
☐ Restricted
☐ N Non-elected
☐ I Interference
☐ A Appeal
☐ O Objected

BEST AVAILABLE COPY

1024
12-5-02

Claim	Date
1	12/1
2	12/1
3	12/1
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5	12/1
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50	12/1

Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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